



12-19-02

2813/8/

PATENT

Attorney Docket No. MTI-31529

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Ronald A. Weimer
Serial No. : 09/935,255
Filing Date : August 22, 2001
For : Method of Composite Gate Formation
Group Art Unit : 2813
Examiner : CHEN, Jack S. J.
Confirmation No. : 1208

TECHNICAL CENTER 2800
REC'D 3-23-2003

RECEIVED

CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

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Washington, D.C. 20231

37 CFR 1.8(a)

37 CFR 1.10

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Transmission

transmitted by facsimile to Fax No _____ addressed to Examiner _____ at the US Patent and Trademark Office.

Date: Dec 17, 02

A handwritten signature in black ink, appearing to read "Jack S. Chen", is written over the "Transmission" section of the form.

Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL1. Transmitted herewith is:

- Second Response to Restriction and Preliminary Amendment
- Replacement Claims (18 sheets)
- Blacklined Claims (18 sheets)
- Return Postcard

STATUS

2. Applicant is a large entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

[X] Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.

[] Applicant petitions for an extension of time under 37 C.F.R. 1.136 for the total number of months checked below [fees: 37 C.F.R. 1.17(a)(1)-(4)] :

Extension <u>(months)</u>	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
[] one month	\$ 110.00	\$ 55.00
[] two months	\$ 390.00	\$ 195.00
[] three months	\$ 890.00	\$ 445.00
[] four months	\$ 1,390.00	\$ 695.00
		Fee: <u>\$0.00</u>

If an additional extension of time is required, please consider this a petition therefor.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment		Highest No. Previously Paid For	Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total	106	Minus	95	= x 9= \$	\$ 25 x 18	\$ \$450.00
Independent	45	Minus	45	= x 42= \$	\$ 0 x 84	\$ 0.00

FIRST PRESENTATION OF MULTIPLE DEP CLAIM

TOTAL ADDIT. Fee \$	or TOTAL ADDIT. Fee <u>\$450.00</u>
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c. [] No additional fee for claims is required.

d. [X] Total additional fee for claims required **\$450.00**

FEE DEFICIENCY

5. [X] If any additional extension and/or fee is required, charge Account No. 23-2053.

[X] If any additional fee for claims is required, charge Account No. 23-2053.

Date: December 17, 2002

Kristine M Strodthoff
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MKE/811305.1